<u>Special Moral Hazard Report for Third Gender</u> (To be completed by an Officer not below the Rank of Branch Manager)

Please answer each question. If answer to any of the following questions is "Yes", please give full details and ask LA to submit relevant document $\,$.

Proposal Number:		Branch Code:	
1	Full Name of the life to be assured		
2	Date of Birth		
3	Age:		
4	Age Proof Submitted		
5	Educational qualification		
6	Occupation		
7	Are you satisfied about the income and need for insurance		
8	Income per month and Proof of income submitted		
9	Is there anything in the occupation, financial or social position of the life to be assured, personal habits or any other circumstances which might be likely to add to the risk? If yes, give full details.		
10	Insurance details of all family members.		
11	Current Physical and Mental state of life to be assured		
12	Whether life proposed has undergone any surgery or life proposed is / ever been on any hormonal treatment.		
13	Are you satisfied with the work profile, life style, educational qualification, income and insurable interest of the life to be assured		
14	Do you recommend acceptance of the proposis insufficient	ou recommend acceptance of the proposal? (Please use seperate sheet , if space sufficient	
Place: Name Design		ature & Seal e of official gnation e of the branch	